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APPLICATION DATA SHEET

AUG 22 2005

**Application Information**

Application Type:: Regular  
Title:: Apparatus for Treatment of Spinal Disorders  
Attorney Docket Number:: S-9-2  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 51  
Small Entity?:: No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Jean  
Family Name:: Woloszko  
City of Residence:: Mountain View  
Country of Residence:: USA  
Street of mailing address:: 1694 Columbia Drive  
City of mailing address:: Mountain View  
State or Province of mailing address:: California  
Country of mailing address:: USA  
Postal or Zip Code of mailing address:: 94085

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity

Given Name:: Theodore C.  
Family Name:: Ormsby  
City of Residence:: Escondido  
Country of Residence:: USA  
Street of mailing address:: 1354 Emeraude Glen  
City of mailing address:: Escondido  
State or Province of mailing address:: California  
Country of mailing address:: USA  
Postal or Zip Code of mailing address:: 92029

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: John J.  
Family Name:: Quackenbush  
City of Residence:: Santa Clara  
Country of Residence:: USA  
Street of mailing address:: 2441 Austin Place  
City of mailing address:: Santa Clara  
State or Province of mailing address:: California  
Country of mailing address:: USA  
Postal or Zip Code of mailing address:: 95050

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Brian  
Family Name:: Martini

City of Residence:: Menlo Park  
 Country of Residence:: USA  
 Street of mailing address:: 25 Harrison Way  
 City of mailing address:: Menlo Park  
 State or Province of mailing address:: California  
 Country of mailing address:: USA  
 Postal or Zip Code of mailing address:: 94025

#### **Correspondence Information**

Correspondence Customer Number:: 021394  
 Name:: ArthroCare Corporation  
 Street of mailing address:: 680 Vaqueros Avenue  
 City of mailing address:: Sunnyvale  
 State or Province of mailing address:: CA  
 Country of mailing address:: USA  
 Postal or Zip Code of mailing address:: 94085-3523  
 Phone number:: (408) 736-0224  
 Fax Number:: (408) 530-9143  
 E-Mail address:: rbatt@arthrocare.com

#### **Representative Information**

Representative Customer Number:: 021394

#### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-provisional of	60/224,107	August 9, 2000

#### **Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::

**Assignee Information**

Assignee name:: ArthroCare Corporation  
Street of mailing address:: 111 Congress Avenue Suite 510  
City of mailing address:: Austin  
State or Province of mailing address:: Texas  
Postal or Zip Code of mailing address:: 78701